## GOVERNMENT OF THE DISTRICT OF COLUMBIA Department of Health Care Finance

Office of Rates, Reimbursement & Financial Analysis



## **SUBJECT: Compiled Behavioral Health Transformation Demonstration Program Rates**

The purpose of this notice is to inform the District of Columbia's Medicaid providers of the reimbursement rates for behavioral health services provided to Medicaid beneficiaries under the Behavioral Health Transformation Demonstration Program (Demonstration Program).

In accordance with the requirements of Chapter 86 (Behavioral Health Transformation Demonstration Program) of Title 29 (Public Welfare) of the District of Columbia Municipal Regulations, services authorized under the Demonstration Program are reimbursed in accordance with the Medicaid fee schedule, unless otherwise indicated. The Medicaid fee schedule is located on the DHCF website at <a href="https://www.dc-medicaid.com">www.dc-medicaid.com</a>.

The table below outlines the codes and associated rates for the services provided under the Demonstration Program.

Service Description	Procedure Code	Modifier	Reimbursement Rate
<b>Psychiatric Hospitalizations</b>			
Psychiatric Hospitalization – St. Elizabeths Hospital	-	-	\$450.00 Daily Per Diem (adjusted by the 30% local share) and subject to the final audited cost settlement process.
Psychiatric Hospitalization – In IMD other than St. Elizabeths Hospital	-	-	The reimbursement is calculated as: Hospital specific base rate X APR-DRG relative weight X Paid days.
Withdrawal Management			
Withdrawal Management (WM) – Hospital	-	-	The reimbursement is calculated as: Hospital specific base rate X APR-DRG relative weight X Paid days.
Short-term Medically Monitored Inpatient Withdrawal Management (MMIWM), Non-Hospital	H0010	U1	\$496.98 Per diem
Residential SUD Services			
Diagnostic Assessment Comprehensive, Adult	H0001	-	\$259.28 Per service
Behavioral Health Screening, Initial, Determine eligibility	H0002	HF	\$86.43 Per service

Assessment, on-going, Risk Rating Counseling, Individual, Onsite, Behavioral Health Therapy Counseling, Family with Client Counseling, Family with Client Counseling, Family without Client Counseling, Group H0005 - \$7.21 Per 15 minutes Crisis Intervention H0007 HF \$36.93 Per 15 minutes  Medication Management, Adult Redication Assisted Treatment, Methadone, Clinic or Take Home Medication Assisted Therapy, Administration Breathalyzer Collection H0048 HF \$8.58 Per service Urinalysis Collection H0048 LR \$8.80 Per service Urinalysis Collection Urinalysis Collection H0048 LR \$8.80 Per service Urinalysis Collection H0048 LR \$8.80 Per service Urinalysis Collection H0048 LR \$8.80 Per service Urinalysis Collection H0048 H2027 HQ \$6.07 Per 15 minutes  Counseling, Group, Psychoeducational H1V) Counseling, Group, Psychoeducational H1V) H2027 HQ-HF \$6.07 Per 15 minutes  Recovery Support Evaluation, Alcohol/drug Assessment Recovery Support, H2014 HQ \$6.07 Per 15 minutes  Recovery Support, H2014 HQ \$6.07 Per 15 minutes  Recovery Support, H2014 HQ \$6.07 Per 15 minutes  Recovery Support, H2014 HV \$24.27 Per 15 minutes  Recovery Support, H2015 HE \$18.61 Per 15 minutes	D		ı		
Rating	Behavioral Health	****			
Counseling, Individual, Onsite, Behavioral Health Therapy   Counseling, Family with Client   H0004   HF-HR   \$28.81 Per 15 minutes		H0002	TG	\$150.77 Per service	
site, Behavioral Health         HO004         HF         \$28.81 Per 15 minutes           Therapy         Counseling, Family with         H0004         HF-HR         \$28.81 Per 15 minutes           Counseling, Family without Client         H0004         HF-HS         \$28.81 Per 15 minutes           Counseling, Group         H0005         -         \$7.21 Per 15 minutes           Crisis Intervention         H0007         HF         \$36.93 Per 15 minutes           Medication Management, Adult         H0016         -         \$50.26 Per 15 minutes           Medication Assisted Treatment, Methadone, Clinic or Take Home         H0020         -         \$8.58 Per service           Medication Assisted Treatment, Methadone, Ho020         H0020         -         \$8.58 Per service           Clinic or Take Home         H0020         HF         \$8.58 Per service           Medication Assisted Treatment, Methadone, H0020         HF         \$8.58 Per service           Clinical Care Coordination         H0048         -         \$8.80 Per service           Urinalysis Collection         H0048         -         \$8.80 Per service           Clinical Care Coordination         T1017         HF         \$26.42 Per 15 minutes           Counseling, Group, Psychoculacitional (HV)         H2027         HQ         \$6.07					
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Recovery Support Services f	or SUD		
Recovery Support Evaluation, Alcohol/drug Assessment	H0001	HF	\$86.43 Per service
Recovery Support, Individual	H2014	-	\$24.27 Per 15 minutes
Recovery Support, Group	H2014	HQ	\$6.07 Per 15 minutes
Recovery Support, Individual (HIV)	H2014	HV	\$24.27 Per 15 minutes
<b>Licensed Behavioral Health</b>	Practitioners		
Psychologists/Other Behavioral Health Providers	-	-	80% of the Medicare Fee Schedule
Trauma-Targeted Care			
Trauma Recovery and Empowerment Model (TREM)	H0004	ST-UB	\$10.00 Per 15 minutes
Trauma Systems Therapy (TST)	H0004	ST-UA	\$36.18 Per 15 minutes
Behavioral Health Stabilizat	ion		
Brief Psychiatric Emergency (up to 4 hours)	S9484	-	\$236.72 Per hour
Extended Psychiatric Emergency (up to 24 hours)	S9485	-	\$1,095.00 Per diem
Extended Psychiatric Observation (24 to 72 hours)	S9485	-	\$1,095.00 Per diem
Short-term Psychiatric Stabilization	S9485	U1	\$384.94 Per diem
Mobile Crisis Intervention	S9484	U1	\$236.72 Per hour
Behavioral Health Outreach	H0023	-	\$203.51 Per service
Transition Planning Services			
Transition Planning, SMI	G9012	HE	\$1,021.33 Per service
Transition Planning, SUD	G9012	HF	\$1,021.33 Per service

For services related to Medicaid beneficiaries who are deaf or hard of hearing, the following reimbursement rates shall apply:

Service Description	Procedure Code	Modifier	Reimbursement Rate
Withdrawal Management			
Short-term MMIWM, non-hospital	H0010	U1-HK	\$718.33 Per diem
Residential SUD Services			
Diagnostic Assessment Comprehensive, Adult	H0001	НК	\$345.63 Per service

Behavioral Health			
Screening, Initial, Determine	H0002	HF-HK	\$115.21 Per service
eligibility			
Behavioral Health	110003	TO IVI	\$100.00 B
Assessment, on-going, Risk	H0002	TG-HK	\$189.00 Per service
Rating Counseling, Individual, On-			
site, Behavioral Health	H0004	HF-HK	\$35.68 Per 15 minutes
Therapy	110001	111 1111	
Counseling, Family with	110004	HF-HR-	\$25,50 P 15
Client	H0004	HK	\$35.68 Per 15 minutes
Counseling, Family without	H0004	HF-HS-	\$35.68 Per 15 minutes
Client		HK	
Counseling, Group	H0005	HK	\$10.80 Per 15 minutes
Crisis Intervention	H0007	HF-HK	\$49.85 Per 15 minutes
Medication Management,	H0016	HK	\$60.28 Per 15 minutes
Adult	110010		+ 001 <b>2</b> 0 1 <b>0</b> 1 10 11111 <b>0</b> 00
Medication Assisted	110020	НК	¢0.50 Dan samias
Treatment, Methadone, Clinic or Take Home	H0020	пк	\$8.58 Per service
Medication Assisted			
Therapy, Administration	H0020	HF-HK	\$11.58 Per service
Breathalyzer Collection	H0048	HK	\$11.88 Per service
Urinalysis Collection	H0048	LR-HK	\$11.88 Per service
Clinical Care Coordination	T1017	HF-HK	\$35.67 Per 15 minutes
Counseling, Group, Psycho-	Н2027	но ни	\$8.97 Per 15 minutes
educational	H2027	HQ-HK	\$8.97 Per 13 minutes
Counseling, Group, Psycho-	H2027	HQ-HF-	\$8.97 Per 15 minutes
educational (HIV)	112027	HK	+
Recovery Support	H0001	HF-HK	\$115.21 Per service
Evaluation, Alcohol/drug Assessment	поот	пг-пк	\$113.21 Per service
Recovery Support,			
Individual	H2014	HK	\$29.66 Per 15 minutes
Recovery Support, Group	H2014	HQ-HK	\$8.98 Per 15 minutes
Recovery Support,	H2014	HV-HK	\$29.66 Per 15 minutes
Individual (HIV)	112017	11 4 -1117	φ27.00 1 ct 13 minutes
Trauma Recovery and	110004	ST-UB-	¢12.50 Den 15 minutes
Empowerment Model (TREM)	H0004	HK	\$13.50 Per 15 minutes
Clubhouse		1	1
Psychosocial Rehabilitation			T.
(Clubhouse)	H2031	HK	\$128.25 Daily
Supported Employment for SMI			
Supported Employment,		1117	\$25.12 Day 15 minutes
Vocational	H2025	HK	\$25.12 Per 15 minutes
Supported Employment for SUD			

Supported Employment, Therapeutic	H2023	HF-HK	\$25.12 Per 15 minutes		
Supported Employment, Vocational	H2025	HF- HK	\$25.12 Per 15 minutes		
<b>Recovery Support Services f</b>	or SUD				
Recovery Support Evaluation, Alcohol/drug Assessment	H0001	HF-HK	\$115.21 Per service		
Recovery Support, Individual	H2014	НК	\$29.66 Per 15 minutes		
Recovery Support, Group	H2014	HQ-HK	\$8.98 Per 15 minutes		
Recovery Support, Individual (HIV)	H2014	HV-HK	\$29.66 Per 15 minutes		
Trauma-Targeted Care					
Trauma Recovery and Empowerment Model (TREM)	H0004	ST-UB- HK	\$13.50 Per 15 minutes		
Trauma Systems Therapy (TST)	H0004	ST-UA- HK	\$48.84 Per 15 minutes		
Transition Planning Services					
Transition Planning, SMI	G9012	НЕ-НК	\$1,378.80 Per service		
Transition Planning, SUD	G9012	HF-HK	\$1,378.80 Per service		

If you have questions, please contact Don Shearer, Director, Health Care Operations Administration, Department of Health Care Finance (DHCF) on (202) 698-2007.